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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No. : 6,090,462  
Patent App. No. : 08/971,524  
Inventor: : Ray D. Kanter  
Issue Date : July 18, 2000  
Title : SHOCK ABSORBING CARPET SYSTEM  
Group A.U. : 1772  
Examiner : Nasser Ahmad  
Docket No. : 114510.010100/US-F0003

**REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY  
AND CHANGE OF CORRESPONDENCE ADDRESS  
AND "FEE ADDRESS" INDICATION FORM**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
Fax No.: 571.273.9900

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Please find the enclosed revocation of power of attorney with a new power of attorney and change of correspondence address. This document revokes all previous powers of attorney and grants power of attorney those practitioners associated with Customer Number 70-155, including the undersigned attorney. Kindly direct future correspondence to the address associated with Customer Number 70-155.

Also enclosed is a "fee address" indication form, which kindly requests all future fee notices be directed to the address associated with Customer Number 70-155.

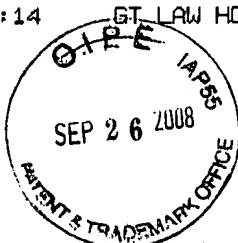
Applicant does not believe any additional fees are necessary for this Preliminary Amendment, however, in the event that any fees are due, the Commissioner is authorized to charge any fees which may be required, (or credit any overpayment) to Account No. 50-2638, Order No. 114510.010100/US-F0003.

Respectfully submitted,

Date: 9/24/2008

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PTO/SB/81 (07-08)

Approved for use through 12/31/2008. OMB 0651-0036

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<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	06901524
	Filing Date	Nov 17, 1997
	First Named Inventor	Ray D. Kuntz
	Title	SHOCK ABRASION CARPET SYSTEM
	Art Unit	1772
	Examiner Name	Monica Ahlberg
Attorney Docket Number	114510.010100/US-7903	

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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I am the:

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OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

☐ Statement under 37 CFR 3.73(b) (Form PTO/SB/86) submitted herewith or filed on \_\_\_\_\_

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Title and Company

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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